

85EC-408

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/724,928	
	<b>Filing Date</b>	November 28, 2000	
	<b>First Named Inventor</b>	Fodor et al.	
	<b>Group Art Unit</b>	1627	
	<b>Examiner Name</b>	To be assigned	
<b>Total Number of Pages in This Submission</b>	1	<b>Attorney Docket Number</b>	018547036750

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Preliminary Amendment; Return Postcard
<b>Remarks</b>		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

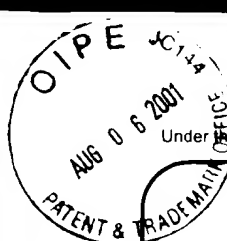
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm and Individual name</b>	Townsend and Townsend and Crew LLP Joe Liebeschuetz		Reg No. 37,505
<b>Signature</b>			
<b>Date</b>	August 1, 2001		

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <u>8/1/01</u>			
<b>Typed or printed name</b>	Leticia A. Hernandez		
<b>Signature</b>		<b>Date</b>	8/1/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. PA 3159516 v1



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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 3274

## Complete if Known

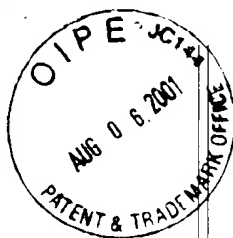
Application Number	09/724,928
Filing Date	November 28, 2000
First Named Inventor	Fodor et al.
Examiner Name	To be assigned
Group Art Unit	1627
Attorney Docket No.	018547-036750US

<b>METHOD OF PAYMENT</b>		<b>FEE CALCULATION (continued)</b>																																											
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:  Deposit Account Number: 20-1430  Deposit Account Name: Townsend and Townsend and Crew LLP  <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>3. ADDITIONAL FEES</b>																																											
2. <input type="checkbox"/> Payment Enclosed:  <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																													
<b>1. BASIC FILING FEE</b>																																													
<table><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>710</td><td>201</td><td>355</td><td>Utility filing fee</td><td>710</td></tr><tr><td>106</td><td>320</td><td>206</td><td>160</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>490</td><td>207</td><td>245</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>710</td><td>208</td><td>355</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td><b>(\$710)</b></td></tr></tbody></table>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	101	710	201	355	Utility filing fee	710	106	320	206	160	Design filing fee		107	490	207	245	Plant filing fee		108	710	208	355	Reissue filing fee		114	150	214	75	Provisional filing fee		<b>SUBTOTAL (1)</b>					<b>(\$710)</b>		
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<b>2. EXTRA CLAIM FEES</b>																																													
Total Claims: 98 -20** = 78 X \$18 = \$1,404 Independent Claims: 11 -3** = 8 X \$80 = \$640 Multiple Dependent: X =  <table><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td></tr><tr><td>102</td><td>80</td><td>202</td><td>40</td><td>Independent claims in excess of 3</td></tr><tr><td>104</td><td>270</td><td>204</td><td>135</td><td>Multiple dependent claim, if not paid</td></tr><tr><td>109</td><td>80</td><td>209</td><td>40</td><td>** Reissue independent claims over original patent</td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td></tr><tr><td colspan="5"><b>SUBTOTAL (2)</b></td><td><b>(\$2044)</b></td></tr></tbody></table>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	103	18	203	9	Claims in excess of 20	102	80	202	40	Independent claims in excess of 3	104	270	204	135	Multiple dependent claim, if not paid	109	80	209	40	** Reissue independent claims over original patent	110	18	210	9	** Reissue claims in excess of 20 and over original patent	<b>SUBTOTAL (2)</b>					<b>(\$2044)</b>								
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**or number previously paid, if greater; For Reissues, see above																																													
		<b>581</b> 40 581 40 Recording each patent assignment per property (times number of properties)																																											
		<b>146</b> 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))																																											
		<b>149</b> 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))																																											
		<b>179</b> 710 279 355 Request for Continued Examination (RCE)																																											
		<b>169</b> 900 169 900 Request for expedited examination of a design application																																											
		Other fee (specify)																																											
		The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.																																											
		<b>*Reduced by Basic Filing Fee Paid</b> <b>SUBTOTAL (3)</b> <b>(\$520)</b>																																											

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>			
Name (Print/Type)	Joe Liebeschutz	Registration No. (Attorney/Agent)	37,505	Telephone	650-326-2400
Signature				Date	August 1, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

PATENT  
Attorney Docket No.: 018547-036750US

Assistant Commissioner for Patents  
Attn: Box Missing Parts  
Washington, D.C. 20231

On August 1 2001

TOWNSEND and TOWNSEND and CREW LLP

By: [Signature]

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Stephen P.A. Fodor et al.

Application No.: 09/724,928

Filed: November 28, 2000

For: Very Large Scale Immobilized  
Polymer Synthesis

Examiner: To be assigned

Art Unit: 1627

TRANSMITTAL LETTER –  
RESPONSE TO NOTICE OF MISSING  
PARTS

Attn: Box Missing Parts  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Pursuant to the Notice to File Missing Parts of Nonprovisional Application, dated April 23, 2001, enclosed are the following to be made of record in the above-identified application:

- 1) Petition to Extend Time
- 2) Copy of Notice of Missing Parts

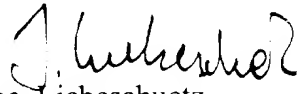
Please charge Deposit Account No. 20-1430 for the following fees:

Large Entity:	(a) Filing Fee (§ 1.16(a)) (Large Entity)	\$710.00
	(b) Excess Claims Fees (§ 1.16(b), (c)):	

98 - 20 = 78	x \$18.00 =	\$1,404.00
11 - 3 = 8	x \$80.00 =	\$640.00
(c) Missing Parts Surcharge		\$130.00
<b>TOTAL FEES TO BE CHARGED</b>		<b>\$2,884.00</b>

The Commissioner is hereby authorized to charge any additional fees associated with this paper or during the pendency of this application, or credit any overpayment, to Deposit Account No. 20-1430. This Transmittal Letter is submitted in triplicate.

Respectfully submitted,

  
Joe Liebeschuetz  
Reg. No. 37,505

**Customer No. 20350**

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, 8<sup>th</sup> Floor  
San Francisco, California 94111-3834  
Tel: 650-326-2400  
Fax: 415 576-0300  
JOL:lah

## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/724,928	11/28/2000	Stephen P.A. Fodor	18547-036750US

20350  
TOWNSEND AND TOWNSEND AND CREW  
TWO EMBARCADERO CENTER  
EIGHTH FLOOR  
SAN FRANCISCO, CA 94111-3834

CONFIRMATION NO. 9541

## FORMALITIES LETTER



\*OC000000005993768\*

Date Mailed: 04/23/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

## Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.  
*Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).*
- Total additional claim fee(s) for this application is \$1208.
  - \$648 for 36 total claims over 20.
  - \$560 for 7 independent claims over 3.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 2048.
- The nucleotide and/or amino acid sequence disclosure contained in this application does not comply with the requirements for such a disclosure as set forth in 37 CFR 1.821 - 1.825 for the following reason(s):

For questions regarding compliance to these requirements, please contact:

- For Rules Interpretation, call (703) 308-4216
- To Purchase PatentIn Software, call (703) 306-2600
- For PatentIn Software Program Help, call (703) 306-4119 or e-mail at patin21help@uspto.gov or patin3help@uspto.gov

*A copy of this notice MUST be returned with the reply.*

\_\_\_\_\_  
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE